



The Entrant agrees to maintain the	price designated	below for six months:	after closing date of exhibition.
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Artist Jos. A. Ostendorf (Please print plainly)

Telephone No. SH 1 7587 Address 4204 W. 22nd Street Cleveland 9
Please Enclose Registration Fee of \$2.00 (Check or Money Order) With Entry Blank

EDITIONS AND NUMBER FOR SALE PRICE		TITLE (PRINT PLAINLY)	CLASS	DO NOT WRITE IN THESE COLUMNS	
1-	\$10.00	EXIT	34	1346 A	
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## Permission to print prices on labels granted unless declined here

Entry blanks must be filled out and returned to the Museum between March 1 and April 5.

Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 9 to April 16 (except Sunday).

LIST OF CLASSES ON BACK